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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND

Application Number	09/779,379
Filing Date	February 7, 2001
First Named Inventor	SHARP, Gordon P.
Art Unit	2125
Examiner Name	MASINICK, Michael D.
Attorney Docket Number	19836-00011

AND
CHANGE OF CORRESPONDENCE ADDRESS

I hereby revoke all previous powers of attorney given in the above-identified application.								
A Power of Attorney is submitted herewith.								
OR ✓ I hereby appoint the practitioners associated with the Customer Number:					nber:	28534		
Please change the correspondence address for the above-identified application to: The address associated with Customer Number: OR								
Firm o	<i>r</i> ual Name	Jenifer E. Haeckl						
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I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)								
SIGNATURE of Applicant or Assignee of Record								
Signature	ignature MUE							
Name	Robert E. Bri	E. Brierley, President of Aircuity Inc.						
Date	March 21, 20	06	Telephone 617-641-8800					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.								
*Total offorms are submitted.								

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/96 (12-05)

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STATEMENT UNDER 37 CFR 3.73(b)						
Applicant	t/Patent Owner: Gordon P. Shar	p				
Application	on No./Patent No./Control No.:	09/779.379	_Filed/Issue Date: February 7, 200	1		
Entitled:	Air Quality Monitoring Systems and	d Methods				
Aircuity,	Inc. (Name of Assignee)					
states that		·	Type of Assignee: corporation, partnership,	university, government agency, etc.)		
	assignee of less than the entire he extent (by percentage) of its		%)			
in the pat	tent application/patent identified	d above by virtue of either	r:			
A. An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel <u>012116</u> , Frame <u>0780</u> , or a true copy of the original assignment is attached. OR						
	chain of title from the inventor(s), of the patent applicatio	on/patent identified above, to the c	urrent assignee as follows:		
• 1	I. From: The document was recorde Reel, Frame	To: ed in the United States Pr	atent and Trademark Office at or for which a copy thereof is attac	ched.		
2	2. From:	To:_				
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.3	3. From:	To:				
			atent and Trademark Office at , or for which a copy thereof is a	attached.		
	Additional documents in the ch	nain of title are listed on a	supplemental sheet.			
As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11. [NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 302.08]						
The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee. 3-2,-0,5						
	Sį	gnature /		Date		
	Robe	rt E. Brierley		617-641-8800		
	Printed or	r Typed Name		Telephone Number		
		resident Title				

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